								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR									10		9	040	69	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL I	ENTITY		) DR	OTHER SMALL	.,	
TOTAL CLAIMS			19				Γ	RATE	FE	Ε	ſ	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 370	.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			(9 minus 20=		*		Ī	X\$ 9=		(	OR	X\$18=	·-	
INDEPENDENT CLAIMS			minus 3 =		*		Ī	X42=			OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=			OR	+280=		
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2			olumn 2	L	TOTAL	+		or OR	TOTAL	•	
CLAIMS AS AMENDED - PART II								TOTAL			חכ	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							SMALI	ENTIT	ry c	R	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADI TION FE	NAL		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=	l	X42=		$\exists$	OR	X84=		
lacksquare	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	•	+					
							L	+140=		$\Box$	DR	+280= TOTAL	•	
							A	TOTA DDIT. FE			DR	ADDIT. FEE		
		(Column 1)			mn 2) HEST	(Column 3)	_				ĺ			
AMENDMENT B	·	REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			DR	X\$18=		
	Independent	*	Minus	***		=	ľ	X42=		$\neg$	OR	X84=		
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	T CLAIM		┞	4.40				. 000		
							L	+140= TOTA	.		OR	+280= TOTAL		
									Ē <b>L</b>		DR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3 CLAIMS HIGHEST						_							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			)R	X\$18=		
	Independent	*	Minus	***		=		X42=	1	$\neg$	חר	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-		DR	<del></del>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											R	+280=		
** If the entry in column 1 is less than the entry in column 2, write "U in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											DR .	TOTAL ADDIT. FEE	L	
	The "Highest Nun	nber Previously Pa	id For (Total o	r Independ	lent) is the	highest number	r four	nd in the a	ppropria	te box i	n col	lumn 1.		